

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Type:	REGULAR
Subject Matter:	UTILITY
CD-ROM OR CD-R?:	NONE
Title:	Method And/Or Process For Preparing T-Carboxylaryl Substituted Diphenyl Ureas As Raf Kinase Inhibitors

Attorney Docket Number:	BAYER-0015-P4
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### INVENTOR INFORMATION

Applicant Authority Type:	INVENTOR
Primary Citizenship Country:	Germany
Status:	FULL CAPACITY
Given Name:	Bernd
Family Name:	RIEDL
City of Residence:	Wuppertal
Country of Residence:	Germany
Street of Mailing Address:	Von Der Goltz Strasse 7
Country of Mailing Address:	Germany
Postal or Zip Code of Mailing Address:	42329

Applicant Authority Type:	INVENTOR
Primary Citizenship Country:	France
Status:	FULL CAPACITY
Given Name:	Jacques
Family Name:	DUMAS
City of Residence:	Bethany
Country of Residence:	United States
Street of Mailing Address:	98 Farmview Road
Country of Mailing Address:	United States
Postal or Zip Code of Mailing Address:	06524

**Applicant Authority Type:**  
**Primary Citizenship Country:**  
**Status:**  
**Given Name:**  
**Family Name:**  
**City of Residence:**  
**Country of Residence:**  
**Street of Mailing Address:**  
**Country of Mailing Address:**  
**Postal or Zip Code of Mailing Address:**

**INVENTOR**  
**India**  
**FULL CAPACITY**  
**Uday**  
**KHIRE**  
**Hamden**  
**United States**  
**101 Tanglewood Drive**  
**United States**  
**06518**

**Applicant Authority Type:**  
**Primary Citizenship Country:**  
**Status:**  
**Given Name:**  
**Family Name:**  
**City of Residence:**  
**Country of Residence:**  
**Street of Mailing Address:**  
**Country of Mailing Address:**  
**Postal or Zip Code of Mailing Address:**

**INVENTOR**  
**Germany**  
**FULL CAPACITY**  
**Timothy**  
**LOWINGER**  
**Wuppertal**  
**Germany**  
**Wotanstrasse 11**  
**Germany**  
**42117**

**Applicant Authority Type:**  
**Primary Citizenship Country:**  
**Status:**  
**Given Name:**  
**Family Name:**  
**City of Residence:**  
**Country of Residence:**  
**Street of Mailing Address:**  
**Country of Mailing Address:**  
**Postal or Zip Code of Mailing Address:**

**INVENTOR**  
**United States**  
**FULL CAPACITY**  
**William**  
**SCOTT**  
**Guilford**  
**United States**  
**210 Saddle Hill Drive**  
**United States**  
**06437**

**Applicant Authority Type:**  
**Primary Citizenship Country:**  
**Status:**  
**Given Name:**  
**Family Name:**  
**City of Residence:**  
**Country of Residence:**  
**Street of Mailing Address:**  
**Country of Mailing Address:**  
**Postal or Zip Code of Mailing Address:**

**INVENTOR**  
**Canada**  
**FULL CAPACITY**  
**Roger**  
**SMITH**  
**Madison**  
**United States**  
**65 Winterhill Road**  
**United States**  
**06443**

**Applicant Authority Type:** INVENTOR  
**Primary Citizenship Country:** United States  
**Status:** FULL CAPACITY  
**Given Name:** Jill  
**Family Name:** WOOD  
**City of Residence:** North Haven  
**Country of Residence:** United States  
**Street of Mailing Address:** 3007 Ridge Road  
**Country of Mailing Address:** United States  
**Postal or Zip Code of Mailing Address:** 06473

**CORRESPONDENCE INFORMATION**

**Correspondence Customer Number:** 23599

**REPRESENTATIVE INFORMATION**

**Representative Customer Number:** 23599

**DOMESTIC PRIORITY INFORMATION: NONE**

<b>Application</b>	<b>Continuity Type:</b>	<b>Parent Application</b>	<b>Parent Filing Date</b>
<b>This Application</b>			

**ASSIGNMENT INFORMATION**

**Assignee Name:** Bayer Pharmaceuticals Corporation  
**Street of Mailing Address:** 400 Morgan Lane  
**City of Mailing Address:** West Haven  
**State or Province of Mailing Address:** Connecticut  
**Country of Mailing Address:** United States  
**Postal or Zip Code of Mailing Address:** 06516